MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO	FILING DATE
_1978386_	
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/							51						
2		'						52						
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49								99						
50								100						
TOTAL IND.	3	↓		↓		↓		TOTAL IND.		↓		↓		↓
TOTAL DEP.	8	←		←		←		TOTAL DEP.		←		←		←
TOTAL CLAIMS	11							TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-1360 (REV 3-78)

U.S. DEPARTMENT OF COMMERCE
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